# STATE OF ALABAMA DEPARTMENT OF INSURANCE

# **DOMESTIC Life, Accident and Health Companies**

## SPECIAL INSTRUCTIONS FOR FILING PREMIUM TAX AND FINANCIAL STATEMENTS

## IMPORTANT INFORMATION

It is necessary to include your NAIC number in the spaces provided. Do not use the federal identification number in place of your NAIC number.

## FILING OF PREMIUM TAXES, FEES, and ANNUAL FINANCIAL STATEMENT

AT THIS TIME, THE ALABAMA DEPARTMENT OF INSURANCE DOES NOT HAVE AN EFT ACCOUNT. The Department has established a lock box operation for receipt of ALL Premium Taxes and Fees. Premium Taxes and Fees, ALL tax returns, and the Annual Statement should be sent to the Lock Box below. It is the responsibility of the Company to see that Filings are timely and mailed to the correct Lock box. Mail the following items to the address below:

# THE ITEMS BELOW ARE DUE BY MARCH 1st OF EACH YEAR

- 1. Annual Premium Tax Return, applicable taxes and fees
- 2. Two (2) forms of documentation in support of all deductions taken on the Premium Tax Return
- 3. If premium taxes are being paid at less than the maximum tax rate because of policies which have a face amount of \$25,000 or less, Group policies with less than 50 participants, or tax-exempt premiums, then provide a listing showing the number of policies in each category-see company's underwriting unit.
- 4. Official List
- 5. Application for License Renewal
- 6. Annual Financial Statement
- 7. Actuarial Opinion
- 8. \$500 Annual Audit and Examination Fee and Transmittal Form—this item only, see reverse side for address

POSTAL SERVICE Alabama Department of Insurance c/o Compass Bank P. O. Box 830691 Birmingham, AL 35283-0691 COURIER OR EXPRESS SERVICE Alabama Department of Insurance c/o Compass Bank 701 South 32<sup>nd</sup> Street Birmingham, AL 35233

## FILING REQUIREMENTS – Fees (see premium tax returns)

1. Annual Statement Filing Fee: \$25.00

2. License Renewal Fees: Life Companies 505.00

---OVER----

#### FILING REQUIREMENTS - Audit and Examination Fees and due dates

The Annual Audit and Examination Fee for Mutual Aid Associations, Fraternal Benefit Societies, and Health Maintenance Organizations is \$150. The Audit and Examination Fee for all other licensed insurance companies is \$500. A check should be attached to the Transmittal Form and mailed to:

POSTAL SERVICE Alabama Department of Insurance c/o Compass Bank P. O. Box 830707 Birmingham, AL 35283-0707 COURIER OR EXPRESS SERVICE Alabama Department of Insurance c/o Compass Bank 701 South 32<sup>nd</sup> Street Birmingham, AL 35233

## SUPPLEMENTAL FILINGS -DUE DATES

All Supplemental filings required by the NAIC Annual Statement Instructions must be filed by the appropriate due dates. Mail the documents below directly to the Alabama Department of Insurance unless otherwise stated:

Actuarial Opinion – due along with annual financial statement
Management Discussion and Analysis – due April 1 of each year
Audited Financial Statement – by an independent CPA – due no later than June 1 of each year
Form B and Form C – due no later than June 1 of each year along with a \$500 filing fee
Quarterly Financial Statements - due May 15, August 15, and September 15 of each year

POSTAL SERVICE Alabama Department of Insurance P. O. Box 303351 Montgomery, AL 36130-3351 COURIER OR EXPRESS SERVICE Alabama Department of Insurance 201 Monroe Street, Suite 1700 Montgomery, AL 36104

ALL FILINGS WITH THE ALABAMA DEPARTMENT OF INSURANCE MUST BE MAILED BY THE U. S. POSTAL SERVICE OR COURIER. HAND DELIVERED DOCUMENTS WILL NOT BE ACCEPTED.

## CONTACT PERSONS

All questions relating to premium tax should be addressed to the Department of Insurance, Examiners Division: Ann Strickland (334-241-4154) or Belinda Williams (334-241-4162).